

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 144
Registered No. 74

1. PLACE OF BIRTH

County Gila State _____
District or Township _____ or Village _____
City Hayden No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Lupe Rodriguez

If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other No 6. Legitimate? Yes 7. Date of birth Dec 12 1926
Month Day Year

8. FATHER
Full name Victo Rodriguez

14. MOTHER
Full maiden name Carmen Huiey

9. Residence (Usual place of abode) Monterey
If non-resident, give place and state.

15. Residence (Usual place of abode) Hayden
If non-resident, give place and state.

10. Color or race Mexican 11. Age at last birthday 31 (Years)

16. Color or race Mexican 17. Age at last birthday 35 (Years)

12. Birthplace (city or place) Monterey
(State or country) Mexico

18. Birthplace (city or place) San Pedro
(State or country) Sonora Mexico

13. Occupation Miner
Nature of Industry

19. Occupation House Wife
Nature of Industry

20. Number of children of this mother 6
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 4
(b) Born alive but now dead 2
(c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ at _____ m. on the date above stated
(Born alive or stillborn.)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Charles B. Huiey

Given name added from a supplemental report _____

(Physician or midwife.)

Address Hayden Ariz

Filed Dec 18 1926 W.D. D. Registrar

Registrar

399-1212-359